



**Town of Middletown**  
**7875 Church Street**  
**Middletown, Virginia 22645**  
**(540) 869-2226 ♦ Fax (540) 869-4306**  
***Gateway to Cedar Creek and Belle Grove National Historical Park***

**TOWN OF MIDDLETOWN WATER & SEWER APPLICATION**

**\*FORM MUST BE COMPLETED IN ITS ENTIRETY OR SERVICE WILL BE DENIED\***

By seeking water and/or sewer services to the property defined below, the Applicant agrees to abide by and accept the conditions governing the use of the Town water supply and sewer treatment systems as adopted, and amended from time to time by the Town Council of the Town of Middletown. The Applicant acknowledges that the Town has established an Identity Theft Program that requires verification and protection of identifying information. There is a \$200.00 deposit fee to begin water/sewer service paid at the time the application is submitted.

Date service to begin: \_\_\_\_\_ Deposit received: \_\_\_\_\_

Service Address: \_\_\_\_\_ Own or Rent: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Photo ID: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Employer: \_\_\_\_\_ Work: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_

Photo ID: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Employer: \_\_\_\_\_ Work: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

Previous Reading: \_\_\_\_\_ Current Reading: \_\_\_\_\_

Date services ended: \_\_\_\_\_

Name: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_